

## ARLINGTON COUNTY COMMUNITY SERVICES BOARD

### Mental Health Committee

December 5, 2018

APPROVED 1/23/19

**Committee Members Present:** Judy Deane (Co-chair), David FitzGerald, Tameka Parker, Anne Hermann, Debra Byrd, Tamara Theiler, Steven Gallagher

**Committee Members Absent:** Dori Mitchell (Co-chair), Caroline Bragdon, Scott Brannon, Tom Quinn, John Mitchell, Wayne Bert, Betsy Greer, Sam Howlett, Leslie Gosling, John Blount

**Others Present:** Officer David Giroux, Officer Michael Keen, Lila Corey (CRI), Florence Jones, Steve Taphorn

**Staff Present:** Alan Orenstein, Leslie Weisman, Grace Guerrero, Dallas Leamon

**Call to Order:** The meeting was called to order at 6:00 pm.

**Approval of Minutes:** The October 24, 2018 minutes were approved.

#### Police and CIT Presentation

Ms. Weisman provided a brief structural overview. She noted that the CIT training began in 2008, Dallas Leamon is the CIT Coordinator, and there is regular communication with the Arlington Police.

Officer Keen provided an overview of the CIT training from the perspective of the police officer. All new officers participate in the 40-hour training after their field training. The content includes crisis de-escalation, role playing, communication techniques, active listening, the range of MH diagnoses, and MH facility tours. About 75% of officers have been trained; untrained officers are primarily in administrative positions. One goal of the training is to facilitate jail diversion as an option. There is currently consideration of developing an advanced CIT curriculum that would include, for example, more about Autism and officer wellness. In general, he found the training very useful and effective.

There followed a number of questions and answers in a very active conversation.

Mr. FitzGerald raised the question of using private transportation to the hospital. Officer Giroux noted the extensive time involved transporting a client to hospitals throughout the state that takes Officers off the street, and he encouraged support for the state contracting for transportation. He stressed also the need for a special vehicle that is more appropriate for the long distances sometimes involved. When asked by Mr. FitzGerald if this approach is effective, Mr. Leamon indicated that from his experience, it was. When asked by Ms. Deane what the contracting issues were, Officer Giroux and Mr. Leamon noted the funding, finding a willing vendor, the liability involved, and the establishment of a state-wide dispatch system.

Ms. Theiler described her experience with police transport. She was very positive about how they kept her informed of the transport process, and she stressed the importance of being aware that clients may not be good advocates for themselves. They may not explain physical problems impacted by a long transit in handcuffs.

Ms. Jones asked why there was not more use of crisis stabilization, and Mr. FitzGerald asked about the proportion of clients taken to the hospital versus crisis stabilization. Officer Giroux reported that there were 1263 suicide or mental health-related police calls last year (probably an underestimate of these situations) of which 555 were TDO'ed and, therefore, resulted in a hospitalization; there is no data on

the number going to crisis intervention. Ms. Deane asked how the police determine who goes to crisis intervention versus police intervention. Officer Giroux described the process beginning with a call to the police and the assessment process that would include needed DHS consultation and assessment legally justifying detaining the person. Mr. Fitzgerald noted that the Emergency Services manager estimated that about 75% of crisis responses were “police only” which Officer Giroux indicated seemed correct. He then proceeded to expand on the proper role for the police, and he noted it could be police only, DHS only and a joint response, whatever seems best for the client and safe for everyone. Ms. Weisman added that safety was a significant issue and involvement of the police was frequently required. Ms. Byrd questioned how the threat was assessed. Officer Giroux described the range of facts that are considered, especially those that enable the legal authority for the police to act. Officer Keen noted that the police role was also to advocate for the person, since there are sometimes exaggerated complaints by citizens. Ms. Weisman clarified what signs may be present that help determine there is a threat. Ms. Jones noted that there were times she had good experiences with police involvement and others in which the experience was not as smooth. She stressed that in her experience the outcome was better when DHS staff were involved with the police. Ms. Deane asked how the police determine if a TDO is required versus that the hospitalization be voluntary. The advantages and disadvantages of a voluntary hospitalization were discussed, with Ms. Weisman noting that a voluntary hospitalization can be dangerous since it was not escorted and the client could change their mind.

Ms. Deane asked if the police were trained in dealing with clients diagnosed with Autism Spectrum Disorder. Officer Keen and Mr. Leamon indicated it was a part of the basic training.

A visitor from Fairfax suggested the Arlington Magistrates get MH First Aide training and Ms. Weisman replied this was a good idea worth pursuing.

### **Outpatient Director’s Report**

Dr. Orenstein described that there were two Committee meeting dates overlapping with the CSB Board’s schedule, 1/23/19 and 5/22/19. When this happened last year, the Committee resolved the conflict by moving the Committee meeting time on these dates to 5:00 pm to 7:00 pm to allow Board members to attend the 7:00 pm Board meetings. There was agreement to change the meeting times. Follow-up: Dr. Orenstein will confirm that presenters can adjust their time, and he will revise the Committee schedule.

### **Chairs’ Report:**

Mr. Fitzgerald reported items from the MH Criminal Justice Review Committee. There are now 14 mental health dockets in Virginia, but there is still none in Arlington. 11.8% of persons released from Virginia prisons become recidivists within 3 years, which is the lowest percent in the U.S. Also, he visited Region 10 regarding their use of MOT, and they indicated that it works well for them. He noted their use of Cognitive Enhancement Therapy which they described as an Evidence-based Practice, and he indicated he would provide a reference to Dr. Orenstein.

**Announcements:** None

**Adjournment.** The Committee adjourned at 7:55 pm.